

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET						SERIAL NO.	1062286		FILING DATE	
						APPLICANT(S)				
						CLAIMS				
	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT		IND	DEP	IND	DEP
	IND	DEP	IND	DEP	IND	DEP				
1	1						51			
2	1						52			
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46							96			
47							97			
48							98			
49							99			
50							100			
TOTAL IND.	4						TOTAL IND.			
TOTAL DEP.	2						TOTAL DEP.			
TOTAL CLAIMS	2						TOTAL CLAIMS			

*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

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